ONB

920.326.5193 Ra

Randolph

608.251.4318

Madison

800.321.5193

Toll Free

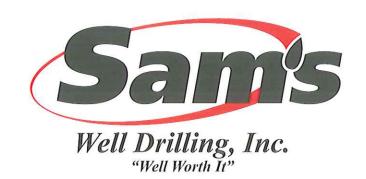
563.203.0182

Cresco, IA

920.326.5209

Fax

January 9, 2014



P.O. Box 150 Randolph, WI 53956

Dave Johnson
Wisconsin Department of Natural Resources
Private Water Systems Section
Bureau of Drinking Water and Ground Water
101 S Webster Street
P.O. Box 7921
Madison, WI 53707-7921



RE: High Capacity Well Application for the Norbert and Janice Kraemer Property, W7055 County Road N, Plymouth, Wisconsin, 53073, Town of Mitchell, Sheboygan County.

Dear Dave:

On behalf of Matthew Matuszak of Northeast Asphalt Inc., Sam's Well Drilling, Inc., proposes to install a high-capacity well for the purpose of aggregate washing in the quarry at the above mentioned address. The enclosed application is for this high-capacity well.

At this time, there is no high-capacity well that is being used for aggregate washing purposes at the quarry. The proposed well will be located in the quarry on the Kraemer property. I have attached the well construction report for the existing well on the Kraemer property. If you have any questions regarding this project, please contact me at (920) 326-5193.

Sincerely,

SAM'S WELL DRILLING, INC.

Jeff Kramer, P.G. Hydrogeologist

Vanos

Agent authorized to submit this application on behalf of the property owners, Norbert and Janice Kraemer and the Aggregate Site Manager for Northeast Asphalt Inc., Matthew Matuszak.

www.samswelldrilling.com

State of Wisconsin Department of Natural Resources Private Water Systems Section - DG/2 dnr.wi.gov

High Capacity, School or Wastewater Treatment Plant JAN 13 2014 **Well Approval Application**

Form 3300-256 (R 7/05)

Page 1 of 6

Notice: Prior department approval is required for the construction, reconstruction or operation of a high expansive water was treatment plant well in accordance with Section NR 812.09(4)(a), Wisconsin Administrative Code. Personally identifiable information collected on this form, including such data as your name, address and phone number, will be used for management of department programs and is unlikely to be used for other purposes. This information will be addressable under Wisconsin's Open Records Laws, ss. 19.32 - 19.39, Wis. Stats.

Use this form to request an approval for installation of a well or wells on a high capacity property, seek approval to make other changes to a high capacity property or to modify a well on a high capacity property, as required by NR 812.09(4)(a), Wisconsin Administrative Code. Refer to definitions of high capacity well, high capacity property and high capacity well system on page 5.

This form is not intended to be used when seeking approval for construction or modification of wells serving water systems regulated under ch. NR 811, Wis. Adm. Code. Any water system serving 7 or more homes, 10 or more mobile homes, 10 or more apartments, 10 or more condominiums, or 10 or more duplexes is regulated under ch. NR 811, Wis. Adm. Code. See NR 811.01, Wis. Adm. Code for applicability requirements.

Control to the Control of the Control of Con		ACON HARROWS WARRANGERSONS		ed to the management of the con-		
Applicant Information						
Application Prepared By (Name and Title)		Company				
JEFF KRAMER HYDROGEOLOGIST		SAM	SWEU	DRILLI	NG	
Street Address		City			State	ZIP Code
P.O. BOX 150		RANDO	XPH		101	53956
Telephone Number	Fax Number		E-Mail Addı			<u> </u>
920-326-5193	920-326-520	09	JEFF	K@ 541	15 WE	WORKLING.
Property Ownership Information						
Property owner, if different than applicant	(Name of Person and Title)	Company				
NORBERT + JANICE K	PARMER OWNE	525				
Street Address		City			State	ZIP Code
W7055 CR-N		Pum	WITH		WI.	53073
Telephone Number	Fax Number		E-Mail Addı			
920-838-2038			NORK	E376	HOTA	MAIL. COM
Well Operator Information						
Well operator if different than owner (Nam	e of Person and Title)	Company				
MATTHEW MATUSZAKI	ACCRECATE SITE MANAGER	MORTH	EAST	ASPHAC	+ IN	C.
Street Address	3.7.0	City			State	ZIP Code
W6380 DESIGN DRI	UE	GREE	WILLE	5	101.	54942
Telephone Number	Fax Number		E-Mail Addı	ress		
920-757-7508	920-757-296	06	MMA	TUSZAIZE	DNE	AJPHACT CON
Property Information					SP, marin	
Enter the High Capacity Well File Number be	elow if the property is already	a high capacity	property. If	the property is n	ot designa	ated as a high capacity
property at the time of application, enter "NC or use the compact disk of departmental well	NE." NOTE: Find the file num	ber in upper rig	ht hand corr	ner of the most i	recent high	n capacity well approval,
"Location" section. File number format is as	follows: (1 or 2 digits for county	y) - (1 digit for w	ell classific	ation) - (1 to 4 d	igits for as	signed property no.).
County	Town			High Capacity		
SHEBOIGAN	MITCHELL	-		c		
Submittal Purpose						
Check all that apply:						
Install one or more new wells with	a capacity greater than 70 g	gallons per mi	nute.			
☐ Install one or more new wells with a	a capacity less than 70 gall	ons per minut	e on a high	n capacity prop	perty.	
Replace one or more wells with a c	capacity greater than 70 gal	llons per minu	te.			
Replace one or more wells with a c	capacity less than 70 gallon	s per minute o	on a high c	apacity proper	ty.	
Reconstruct one or more wells with	a capacity greater than 70	gallons per n	ninute.			
Reconstruct one or more wells with	a capacity less than 70 ga	allons per minu	ute on a hig	gh capacity pro	perty.	
☐ Increase pumping rate in one or me	N10 E S				S S S S S S S S S S S S S S S S S S S	
Request continued operation of hig					required	l.)
Renew a previous approval that ha			(E) N	NAME.		.A.
Well (or wells) will serve a school of		nt. See defini	tions on pa	age 5.		
Other explain	ne conserve a recommendation of the second	overno intendentententelling	To the second se			

Site Status Information Determine the site status using the internet or the compact disk of departmental well data that is issued to drillers and pump installers and the information supplied by the property owner. Internet address is dnr.wi.gov/org/water/dwg/dws.htm. Enter YES or NO for each of the following questions. YES NO Has the property boundary changed since the most recent high capacity well approval was issued? If the property is not yet a high capacity property, check NO. Has there been a change in well ownership since the last approval was written? Date of purchase: If YES, name of current owner: Has there been a change in well operator since the last approval was written? Date of change: If YES, name of current operator: Will a proposed well be connected to a plumbing system that is supplied by other sources (other wells, municipal supply, etc.)? If YES, include a schematic drawing showing backflow protection. Is a proposed well within 1,200 feet of a landfill? Determine if there are any landfills nearby, using the well information compact disk FIND feature. Enter the feature the feature in th compact disk FIND feature. Enter the township, range and section of the well location. If the well is near a section line, also check the adjacent section or sections. If YES, list the landfill site ID Number: Landfill location: (Township/Range/Section) OR Is a proposed well on a property that has a contaminated site? If YES, list the BRRTS (Bureau for Remediation and Redevelopment Tracking System) Number here and specify if the site is open or closed: Open Closed Is a proposed well on a property that has a groundwater use restriction recorded on the deed? If YES, list the BRRTS number, as assigned to the contaminated site by the DNR remediation and redevelopment program: Is a proposed well on a property that is listed on the department's registry of closed remediation sites for a groundwater use restriction? See compact disk or internet at maps.dnr.state.wi.us/imf/dnrimf.jsp?site=brrts. If YES, list the BRRTS Number here: is a proposed well to be used for a public water supply system that serves 25 or more people? See definition of a "public water system" in the definitions section on page 5. Is a proposed well to be installed within a special casing area? Refer to the list of special casing areas that is published by the department and/or contact the regional DNR office. Has the number of wells or pumping capacity in an existing well increased since the most recent high capacity well approval was issued? Has the number of wells decreased since the most recent high capacity well approval? If the property is not yet a high capacity property, check NO. Is a non-pressurized storage vessel (i.e. reservoir) other than a pond proposed or in use? Will the well discharge directly to a storage pond? Is a pressurized tank with a capacity greater than 1,000 gallons proposed or in use? Is a proposed well within 1,200 feet of a quarry? Is a proposed well located in a floodplain or floodway? Are any existing well installations on the high capacity property out of compliance with Chapter NR 812, Wisconsin Administrative Code? Will the well be used as a source of bottled water? Are you seeking a variance to construct a well that has a capacity of less than 70 gallons per minute to low capacity well

construction standards?

Is the property served by a community water system?

Existing Well Information		· · · · · · · · · · · · · · · · · · ·					ra e e els initia de eles.
Enter the following information on	all existing wells on the p	property, if m	ore than four	wells, submi	t additional s	heets:	
Well Name Assigned by Well Owner (North Well, etc.):	FARM WELL						
Well Number Assigned by Owner (001, 002, etc.):	∞1						
WI Unique Well Number or NA if no number:	AT316						
Permanent DNR High Capacity Well Number or N/A if none:	NA						
Public Water System ID Number, if Public (if not public, NONE):	HONE						
Potable or Non-Potable Use:	POTABLE						
Type of Well (Irrigation, Industrial, Residential, etc.):	FARM						
Requested Average Water Usage per Day in Gallons:	500						
Requested Maximum Water Usage per Day in Gallons:	1000				·		
Seasonal? (April to October, Year Around, etc.):	YEAR ROUND						
Approved Pumping Capacity if Previously Approved (gpm):	15.0						
Current Pump Type & Capacity (gpm):	SUBMERSIBLE /	,					
Proposed Pump Type & Capacity If Change Requested (gpm):	NA						
Pump Discharge Type (Over Top of Casing Seal, Pitless, etc.):	PITLESS ADAPT	ER					
Discharge Location (Building Pressure Tank, Pond, etc.):	BUILDING PRESSURE TANK	2					
Height of Well Casing Above Ground In Inches:	18,0		<u>.</u>				
Potential Contaminant Sources and Distance:	BUILDING 14.0						
Well Loc: Quarter Quarter Section	5E 1/4 of 5W 1/4	1/4	of 1/4	1/4	of 1/4	1/4	of 1/4
or Government Lot Number							
Section or French Long Lot No.	13						
Township:	T 14 N	т	N	T	N	T	N
Range (Select E or W):	R 20 X E □W	R	□E □W	R	□E □W	R	□e □w
Latitude (Degrees and Minutes)	43.40482			0			1
Longitude (Degrees and Minutes)	088 0Z868	°	'	0			
GPS Map Datum (WGS84,	605008						
Include as much of the following inform well construction record is attached, ap	nation as practical for wells t oplicant may leave the follow	nat do not hav ing rows blank	e well construc c.	ction records at	tached to the	application, ho	wever if the
Date of Construction:	5/16/89						
Drilled by (Name of Drilling Firm):	KEIFENHEIM						
Drilling Method(s) (Rotary, Percussion, Etc.)	ROTARY						
Well Depth in Feet:	403						
Upper Enlarged Drillhole Diameter in Inches and Depth in Feet:	10,0 20,0 Inches, feet	inches,	<u>feet</u>	inches,	feet	inches,	feet
Lower Drillhole Diameter in Inches and Depth in Feet:	6.0 403.0 inches, feet	inches,	feet	inches,	feet	inches,	feet
Well Casing Diameter in Inches and Depth in Feet:	6.0 357.0 inches, feet	inches,	feet	inches,	feet	inches,	feet
Well Casing Material and Wall Thickness:	STEEL/.780						
Annular Space Material Between Casing and Drillhole Wall:	MUD SCIRRY 0-70'						
Is There a Well Screen (Y or N) If so, Screen Material?:	N						

Proposed Well Information				a dayo			a di tere
Enter the following information on all	proposed wells	on the property, if	more than two wel	ls or alternate const	ruction, submi	additional she	ets:
Well Name Assigned by Well Owner (North Well, etc.):	WASH	PLANT W	SEU				
Well Number Assigned by Owner (001, 002, etc.):		∞z					
Well Loc: Quarter Quarter Section or French Long Lot Number	5W 1/4 0	f LIE 1/4 of	Section 13	1/4 of	1/4	of Section	
or Government Lot Number							
Township & Range (Select E or W)		N,R ZO		Т	N, R	□е	□w
Latitude (Degrees and Minutes)	43 •		944 '	。		- '	1
Longitude (Degrees and Minutes)	<u>088 ·</u>	<u> </u>	<u>820 </u>			_'	•
GPS Map Datum (WGS84, WTM91, etc.)	(P)	8000					
Type of Well (Irrigation, Industrial, Residential, etc.):	Type: TNOU	STRIAL	Potable Non-Potable	Туре:		Potable Non-Po	
Drilling Method(s) (Rotary, Percussion, Etc.):	ROTA	RM	•				
Anticipated Geological Materials and D	Depths that Are Ex	pected During Drilli	ng:				
Material and Depth Interval:	TOD SOIL	from	0' to 4	GRAVEL SA	NO from	140' to 22	<u>ン</u>
Material and Depth Interval:	HARD PAN	from 4	1 to 66	.N	from	' to	,
Material and Depth Interval:	GRAVEL	from L	, to /00	A	from	' to	1
Material and Depth Interval:	BOULDER:	5 from 100	1 to 115	•	from	' to	1
Material and Depth Interval:	SANO	from バブ	1 to 140		from	' to	1
Drillhole Diameter and Anticipated Dep							
Diameter and Depth Interval:	iz.d'	from O	· 10 SOO	1	from	' to	1
Diameter and Depth Interval:		from	' to	F.	from	' to	1
Diameter and Depth Interval:		from	<u>' to</u>	•	from	' to	ŀ
Permanent Casing or Liner Diameter a	1			1			
Dlameter and Wall Thickness at Depth Interval:	12.0 " diam/ .	375 " thick	0' to 160	" diam/	" thick	0 ' to	,
Diameter and Wall Thickness at Depth Interval:	" diam/	" thick	' to	" diam/	" thick	, to	•
Permanent Casing or Liner Material, I	f Used:						•
Casing Joints (Welded, T and C, etc.)	WEDED						
Material and Weight at Depth Interval:	STEEL	A9. Kibs/foot	0' to 160		/ lbs/fo	ot 0 to	f
Material and Weight at Depth Interval:		/ lbs/foot	<u>' to </u>	,	/ lbs/fo	ot ¹ to	
Screen Material, Slot Size in Inches and Depth Interval or N/A if none:	GALVANT:	2ED,010.,	160 · 10200	f	, ,	'/ ¹ to	(
Casing to Screen Joint (Welded, T and C, K Packer, etc.)	WELDED						
Annular Space Material Including Filte	<u> </u>	Used:				······································	
Material and Depth Interval:	NA	1	0 ' to	1		0' to	t
Material and Depth Interval:			' to	,	<u></u>	¹ to	•
Proposed Average Water Usage Per Day in Gallons:	360000		(250 GOA	1			
Proposed Maximum Water Usage Per Day in Gallons:			1500 GDA	1			
Seasonal? (April to October, Year Around, etc.):		OCTOBER					
Proposed Pump Type & Capacity (gpm):	SUBMER	51BLE 50	50 6AM				
Discharge Type (Over Top of Casing Seal, Pitless Adapter or Unit):	OVERTO	P OF CASI	NG				
Discharge Location (Building Pressure Tank, Pond, etc.):	WASH 120		~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~				
Distance and Direction to Nearest Public Utility Well & Well Name:	JOHOOL, E	EF758					
Distance to Other Potential Contaminant Sources:	ZMILES SC MITCHEL	UMWEST TO LANDFILL	CAUN COPE				
Distance to Other Potential Contaminant Sources:							
Leave Blank, for Department use only							

Required Attachments

- Attach one of the maps described in A. or B., below. Plot the existing and proposed well locations on the map. For wells that have a Wisconsin Unique Well Number or a Permanent High Capacity Well Number, plot the well locations with one of those numbers.
 - A. Copy of a plat map with the property boundary clearly shown. If the property is contiguous with properties owned by the same owner in another township, include a copy of that township map too, showing the property boundaries. If the property owner listed on the plat map is different from the current owner, list the date or dates, that the current property owner purchased the property on the map.
 - B. Map of the property prepared by a licensed land surveyor and the property description as described by the surveyor.
- 2. Sketch map showing all of the following that are planned or exist within 300 feet of each proposed well: proposed well location; other wells, property boundary, wetlands; potential contaminant sources (septic tank and drainfield, petroleum storage tanks, sewer lines, etc.); buildings and north arrow. If no pertinent features to map within 300 feet of the proposed well, for example an irrigation well in the middle of a field, state that on the property map listed above and plot the well locations on that map.
- 3. Any well construction records available for existing wells on the property. Do not attach any well construction records for wells that are not on the property. If a Wisconsin Unique Well Number has not been assigned, write a well name or site well number on the record that correlates to the well name or number plotted on the maps.
- 4. For proposed wells with a capacity greater than 400 gallons per minute, include the performance curve or performance table that is provided by the pump manufacturer. If the pump will be a lineshaft turbine, provide a curve with the same rpm as the motor under full load and list the motor horsepower.
- If more than one well is connected to a common plumbing system, also provide a schematic drawing of the system showing method of preventing backflow. This sketch must include the well discharge (pitless, over top of casing sanitary seal); the water line from the well; pressure tanks; sampling faucets; check valves; backflow preventers; air gaps; manually operated valves; water meters; pressure switches for pumps; and any other pertinent fittings. This schematic drawing must also identify which of these components are buried or above ground. If there is more than one check valve within the well casing, include in-well check valves on the schematic
- 6. If reconstruction of an existing well is proposed, include a diagram of the current well construction and a diagram of the proposed construction.
- 7. If the application is for a high capacity well or wells, a \$500.00 check payable to the Department of Natural Resources, unless the application is only for continued operation after a change of ownership.

Certification and Applicant Signatures

If the application requests a variance for a well within 1,200 feet of a landfill, a well on a property with a groundwater use restriction, or any other variance to NR 812, Wis. Adm. Code, the property owner must sign the application. If the well operator will install a well on property that he or she does not own, the property owner must also sign the application. Otherwise, an agent of the owner may sign the application.

Unsigned and incomplete applications will not be approved.

By signing this form, the person signing this application certifies that to the best of his or her knowledge, all existing well installations on the property comply with ch. NR 812, Wis. Adm. Code. The person also certifies that to the best of his or her knowledge, all information in the application is accurate and correct.

Name - Print	Check Box					
JEFF KRAMER	Owner	Agent of the Owner				
Signature Juff Hann	Company SAM'S WELL DRILLING	Date 1/9/14				
Application submittal. Mail completed application Section - DG/2, PO Box 7921, Madison WI 53707	and payment with all required attachments to DNR, Pi 7-7921.	rivate Water Systems				
Definitions from Wisconsin Administrative Cod	les and a significant state of the second stat					

"Public water system" means a system for the provision to the public of piped water for human consumptions if such system has at least 15 service connections or regularly serves an average of at least 25 individuals daily at least 60 days per year. A public water system is either a community water system or a non-community water system. Such system includes: (a) Any collection, treatment, storage, and distribution facilities under control of the operator of such system and used primarily in connection with such system, and (b) Any collection or pretreatment storage facilities not under such control which are used primarily in connection with such system. [NR

"School" means a public or private educational facility in which a program of educational instruction is provided to children in any grade or grades from kindergarten through the 12th grade. Water systems serving athletic fields, school forests, environmental centers, home-based schools, day-care centers and Sunday schools are not school water systems. [NR 812.07(94)]

"Wastewater treatment plant" means any facility provided for the treatment of sanitary or industrial wastewater or both. The following types of facilities are excluded: (a) Facilities defined as private sewage systems in s. 145.01(12), Stats. (b) Pretreatment facilities from which effluent is directed to a public sewer system for treatment. (c) Industrial wastewater treatment facilities which consist solely of a land disposal system. [NR 114.03(14)]

[&]quot;High capacity well" means a well constructed on a high capacity property. [NR 812.07(51)]

[&]quot;High capacity property" means one property on which a high capacity well system exists or is to be constructed. [NR 812.07(52)]

[&]quot;High capacity well system" means one or more wells, drillholes or mine shafts used or to be used to withdraw water for any purpose on one property, if the total pumping or flowing capacity of all wells, drillholes or mine shafts on one property is 70 or more gallons per minute based on the pump curve at the lowest system pressure setting, or based on the flow rate. [NR 812.07(53)]

